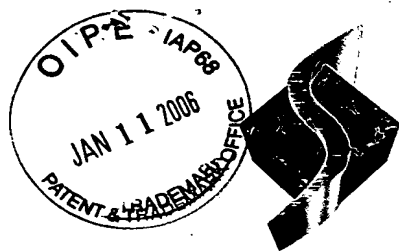


10/722142

COLE



SILVERBROOK RESEARCH Pty Ltd

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ACN 066 573 671

9 January 2006

Commissioner of Patents and Trademarks
United States Patent and Trademarks Office
WASHINGTON DC 20231
USA

Certificate

JAN 17 2006

of Correction

Attention: Certificates of Correction Branch

Dears Sir

United States Patent No. 6,965,439 (09/722,142)

Inventors/Assignors: KIA SILVERBROOK and PAUL LAPSTUN

Assignee: SILVERBROOK RESEARCH PTY LTD

Docket No. NPP023US

Attached is a form PTO/SB/44 requesting a correction to the Foreign Application Priority Data on the Patent Deed, for the above mentioned patent.

As this correction does not result from errors caused by the applicant, no fee has been submitted.

We look forward to the correction in due course.

Yours faithfully

Kia Silverbrook
MANAGING DIRECTOR

Attchs.

JAN 19 2006

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(Also Form PTO-1050)

UNITED STATES PATENT AND TRADEMARK OFFICE CERTIFICATE OF CORRECTION

PATENT NO : 6,965,439(09/722,142)
DATED : November 15, 2005
INVENTOR(S) : Kia Silverbrook and Paul Lapstun

It is certified that error appears in the above-identified patent and that said Letters Patent
is hereby corrected as shown below:

Reference (30) on the first page of the Deed should read:

(30) Foreign Application Priority Data

May 25, 1999 (AU)PQ0559
Jun 30, 1999 (AU)PQ1313
Oct 25, 1999 (AU)PQ3632



Kia Silverbrook
Managing Director
Silverbrook Research Pty Ltd

MAILING ADDRESS OF SENDER: Mr Kia Silverbrook
Silverbrook Research Pty Ltd
393 Darling Street
Balmmain NSW 2041
Australia

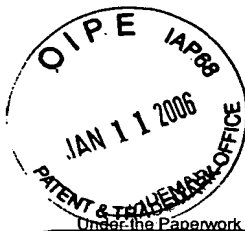
PATENT NO. 6,965,439

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PTO/SB/21 (09-04)
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	6,965,439 (09/722,142)
Filing Date	November 15, 2005
First Named Inventor	Kia Silverbrook
Art Unit	2853
Examiner Name	Arthur G Evans
Attorney Docket Number	NPP023US

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Correction
Remarks Email: kia.silverbrook@silverbrookresearch.com Telephone: 61-2-9818-6633 Facsimile: 61-2-9555 7762		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Silverbrook Research Pty Ltd		
Signature			
Printed name	Kia Silverbrook and Paul Lapstun		
Date	January 9, 2006	Reg. No.	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name		Date	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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JAN 19 2006



PTO/SB/17 (12-04)
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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 100.00

Complete if Known

Application Number	6,965,439 (09/722,142)
Filing Date	November 15, 2005
First Named Inventor	Kia Silverbrook
Examiner Name	Arthur G Evans
Art Unit	2622
Attorney Docket No.	NPP023US

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
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☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____				

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Certificate of Correction

Fees Paid (\$)
100.00

SUBMITTED BY

Signature	<i>Kia Silverbrook</i>	Registration No. (Attorney/Agent)	Telephone 612 98186633
Name (Print/Type)	Kia Silverbrook and Paul Lapstun	Date	January 9, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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The PTO did not receive the following listed item(s) *Check for \$100.00*

JAN 19 2006



PTO/SB/17 (12-04)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 100.00

Complete if Known

Application Number	6,965,439 (09/722,142)
Filing Date	November 15, 2005
First Named Inventor	Kia Silverbrook
Examiner Name	Arthur G Evans
Art Unit	2622
Attorney Docket No.	NPP023US

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims
- 20 or HP = _____ x _____ = _____
HP = highest number of total claims paid for, if greater than 20
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)
- 3 or HP = _____ x _____ = _____
HP = highest number of independent claims paid for, if greater than 3

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Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)
- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Certificate of Correction

Fees Paid (\$)
100.00

SUBMITTED BY

Signature	<u>Kia Silverbrook</u>	Registration No. (Attorney/Agent)	Telephone <u>612 98186633</u>
Name (Print/Type)	Kia Silverbrook and Paul Lapstun	Date	January 9, 2006

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